



HIPPA Notice of Privacy Practices

Dear Patient,

Our practice has always prided itself on our commitment to you as our patient in regards to the confidentiality of your medical record. We are now required by federal law to maintain documentation of our steps to safeguard the privacy of your personal medical information. The law requires that we distribute a copy of our Notice of Privacy Practices to each patient and retain your signature acknowledging that you received a copy of this Notice as part of your permanent record.

Our policies in dealing with your information have changed in order to comply with the current law. It is vital that you understand how these changes will affect the release of your medical information as our staff will be unable to respond to requests for any medical information from anyone not designated by you in writing.

In order for information about you to be released to anyone including your spouse or friends involved in your care or treatment after surgery, we must have a signed authorization in your record letting us know what information you want disclosed and what information you want restricted. If you wish information to be released to your spouse, family or a particular friend you may request the authorization from the receptionist.

Thank you for your patience with the additional paperwork necessary for our practice to comply with federal regulations. We continue to be sensitive to the amount of paperwork that is required to initiate your record with our office and sincerely apologize for any inconvenience that this increase may cause you.

Sincerely,

The Doctors and Staff
Plastic Surgery Specialists, P.C.

****IF YOU FEEL THAT THIS PAPERWORK IS BURDENSOME IN ANY WAY PLEASE CONTACT YOUR REPRESENTATIVE IN THE SENATE OR CONGRESS.**